



CITY OF STAYTON

362 N. Third Avenue • Stayton, Oregon 97383
(503) 769 3425 (Office) • (503) 769-1456 (fax)

Community Grant Application Process

By City Council action, \$4,676.00 was made available for area programs through a grant application process, for Fiscal Year 2011-2012.

There is not a deadline for applying for grant funds however funds will be awarded on a first come first serve basis. Keep in mind that Programs/projects should be focused on serving the citizens of Stayton in or around the Stayton Community.

Below are instructions on how to request grant money.

1. Obtain a Community Grant Application at City Hall or on our website. www.staytonoregon.gov
2. Fill out the application and attach a one page written summary, and a program or agency budget.
3. Turn in all materials to City Hall.
4. The City Administrator and Finance Director will review application. If the application is viewed favorable, the City Administrator will forward a Staff Report to the City Council for their consideration.
5. If the application is approved by the City Council, proper notice will be forwarded to the Finance Director to notify the applicant and disperse the funds.
6. If the application is denied, written notification will be forwarded to the applicant with the reason for denial.

**** ATTACHED TO INSTRUCTION SHEET IS AN APPLICATION.**



City of Stayton Community Grant Application

Date of Application: _____

Application Submitted to: _____

ORGANIZATION INFORMATION

Name of organization: _____

Legal name, if different: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____ Website: _____

Contact person regarding this application: _____

Title: _____ Phone: _____ E-mail: _____

Is your organization an IRS 501©(3) not for profit? _____ Yes _____ No

PROPOSAL INFORMATION

Please type a 1 page summary of request and attach it to this application, along with program or agency annual budget.

Population Served: _____

If your Agency has previously received grant funds from the City of Stayton, please list the year and amount of grant funds received.

Funds are being requested for (check one)

_____ General operating support _____ Project/program support

_____ Start-up costs _____ Technical assistance

_____ Capital _____ Other (please specify) _____

Project dates (if applicable): _____

Fiscal year end: _____

BUDGET

Dollar amount requested: \$ _____

Total annual organization budget: \$ _____

Total project budget \$ _____

Operating: _____

AUTHORIZATION

Name and title of top paid staff or board chair:

_____ Name

_____ Position

Signature: _____ Date: _____

For office use only:	
Date Received:	Completed:
Proposal:	Approved: _____ Yes _____ No

City of Stayton Signature: _____

City Administrator (staff report to be forwarded to City Council for approval)